

# Work Order ID 78144

December-29-11 9:56:37 AM

**\*78144\***

Page 1

Item ID: D2732-030 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Rubber Cushion  
 Start Date: 29/12/2011 Start Qty: 50.00 **\*50\*** Cust Item ID:  
 Required Date: 03/01/2012 Req'd Qty: 50.00 **\*50\*** Customer:  
 Reference:

Approvals: Process Plan: MLJ Date: 11/12/29 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr	Revision Nbr
D2732	Rev B1

100		0.00
<b>*100*</b>		
Packaging	Memo	0.00
Packaging	Cut as per dwg	

SP 12-01-17 (50)

110	QC5- Inspect part completeness to step on W/O	0.00
<b>*110*</b>		
QC	Memo	0.00
Quality Control		

5 12/01/18

(x20)

120	Identify as per dwg & Stock Location: <u>ST 402</u>	0.00
<b>*120*</b>		
Packaging	Memo	0.00
Packaging		

(50) SP 12-01-18

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

**Work Order ID 78144**

December-29-11 9:56:37 AM

**\*78144\***

Page 2

Item ID: D2732-030 Accept **\*N900040100\*** Setup Start **\*NS1\***  
Revision ID: Stop **\*NS2\***  
Item Name: Rubber Cushion  
Start Date: 29/12/2011 Start Qty: 50.00 **\*50\*** Cust Item ID:  
Required Date: 03/01/2012 Req'd Qty: 50.00 **\*50\*** Customer:  
Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	QC21- Final Inspection - Work Order Release	0.00							
<b>*130*</b>									
QC	Memo	0.00							
Quality Control									

12/1/18

R1201-18  
(50)

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Picklist Print

December-29-11 9:56:40 AM

Page 1

Work Order ID: 78144

\*78144\*

Parent Item: D2732-030

\*D2732-030\*

Parent Item Name: Rubber Cushion

Start Date: 29/12/2011

Required Date: 03/01/2012

Start Qty: 50.00

Required Qty: 50.00

Comments: IPP Rev:A 10.11.02 as per revB DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2732		Manufactured	No			100	f	341.7060	0.25	13.15789			

\*D2732\*

Rubber Extrusion

\*\*

12/01/12

Location

Loc Qty

Loc Code

ST410

341.706

70987

341.706

13.15789

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

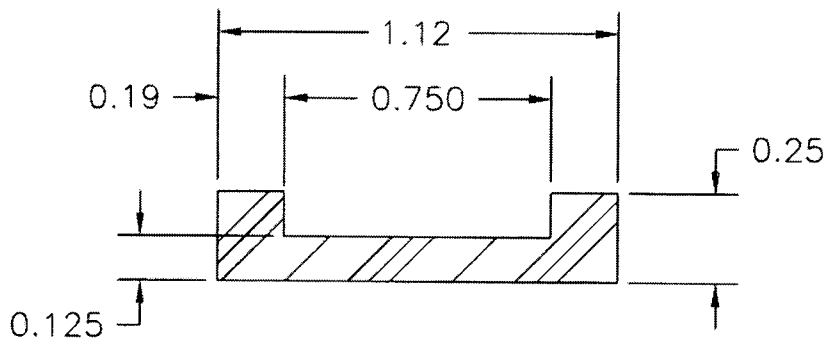
NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries



DESIGN <i>KE</i>	DRAWN BY <i>KE</i>	DART AEROSPACE LTD VICTORIA INTERNATIONAL AIRPORT, CANADA	
CHECKED <i>[Signature]</i>	APPROVED <i>[Signature]</i>	DRAWING NO. D2732	REV. B SHEET 1 OF 1
DATE 98.03.05		TITLE RUBBER EXTRUSION	SCALE 2:1
A	97.12.04	NEW ISSUE	
B	98.03.05	BLACK WAS WHITE	
BI	<i>1P</i> 02.05.23	ADD POSSIBLE SUPPLIER	

RELEASED  
98/03/06 KE



SUPER COPY  
UNCONTROLLED COPY  
SUBJECT TO A  
WITH  
WORK ORDER  
NO. 78144 M.L.J  
11/12/29

D2732-050 RUBBER CUSHION  
LENGTH

EG: 3.5 LONG: D2732-035  
10 LONG: D2732-100

MATERIAL: NEOPRENE BLACK 50 DUROMETER  
NOTE: ALL DIMENSIONS ARE IN INCHES  
TOLERANCES ARE PER DART QSI 018  
UNLESS OTHERWISE NOTED



POSSIBLE SUPPLIER: ACCURATE RUBBER P/N 110750003

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries